

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 21058/0209561-US0
Application Number	09/894,448-Conf. #5199	Filed June 28, 2001
For	METHOD AND SYSTEM FOR ADAPTING A WIRELESS LINK TO ACHIEVE A DESIRED CHANNEL QUALITY	
Art Unit	2617	Examiner S. M. D'Agosta
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$120 Small Entity Fee \$60 \$ _____
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	Fee \$460 Small Entity Fee \$230 \$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	Fee \$1050 Small Entity Fee \$525 \$ _____
<input checked="" type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	Fee \$1640 Small Entity Fee \$820 \$ 1,640.00
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	Fee \$2230 Small Entity Fee \$1115 \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u> . WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>60,419</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>/Alexander D. Walter/</u> Signature		May 30, 2008 Date
<u>Alexander D. Walter</u> Typed or printed name		(212) 527-7700 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.	